PTO/SB/21 (04-04) Approved for use through 07/31/2006. OMB 0651-0031

Under the F	aperwork Reduction Act of	1995, no persor			U.S. DEPARTMENT OF COMMERCE ss it displays a valid OMB control number.			
MADENA			Application Number	10/037,974				
TRANSMITTAL FORM (to be used for all correspondence after initial filing)			Filing Date	Novembe	er 9, 2001			
			First Named Inventor	John C.K	John C.K. Hui			
			Art Unit	3731	3731			
			Examiner Name	Kevin Th	ao Truong			
Total Number of Pages in This Submission			Attorney Docket Number	4857-000	0001/CPF			
ENCLOSURES (check all that apply)								
Fee Transmittal F	Fee Transmittal Form Drawin		g(s)	. —	After Allowance Communication to Technology Center (TC)			
		Licensi	ng-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment / Rep	oly	Petition	1		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final			n to Convert to a onal Application	Propri	etary Information			
Affidavits/dec	Affidavits/declaration(s) Power of Change			☐ Status	Letter			
Extension of Time Request			al Disclaimer		Other Enclosure(s) (please identify below):			
Express Abandonment Request			st for Refund	Ex 14	Request for Continued Examination Transmittal; Form 1449 w/3 foreign references & 17 other; check for \$395; and			
Information Disclosure Statement			Return Receipt Postcard					
Certified Copy of Document(s)	Priority	Rema	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.					
Response to Miss				·				
Response to Missing Parts under 37 CFR 1.52 or 1.53								
	SIGNA	TURE OF 7	APPLICANT, ATTORNEY, O	OR AGENT				
Firm or Individual name Harness, Dickey & Pierce, P.L.		Attorney Name C. Michael Malinzak		leg. No. 3,770				
Signature	Signature							
Date Nov. 24, 2005								
CERTIFICATE OF TRANSMISSION/MAILING								
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.								
Typed or printed name Mithael Malintak			1	Express Mail Label No.	EV 406 076 122 US (5/24/2005)			
Signature				Date	May 24, 2005			

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**FEE TRANSMITTAL** for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

\$)	395

Complete if Known				
Application Number	10/037,974			
Filing Date	November 9, 2001			
First Named Inventor	John C.K. Hui			
Examiner Name	Kevin Thao Truong			
Art Unit	3731			
Attorney Docket No.	4857-000001/CPE			

METHOD OF PATMENT (check all that apply)			3. ADDITIONAL FEES					
☑ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order				Entity	Small E			
Deposit Account:								
Deposit		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description Fee	Paid	
Account 08-0750			1051	130	2051	65	Surcharge - late filing fee or oath	
Number	Number		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit Account Hamess, Dickey & Pierce, PLC		1053	130	1053	130	Non-English specification		
Name			1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
The Director is authorized to: (check all that apply)  ☐ Charge fee(s) indicated below ☑ Credit any overpayments			1804	920°	1804	920°	Requesting publication of SIR prior to Examiner action	
☐ Charge any additional fee(s) or any underpayment of fees under 37 CFR 1.16 and 1.17			1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			1251	120	2251	60	Extension for reply within first month	
	FEE CALCULATION		1252	450	2252	225	Extension for reply within second month	
1 BASIC E	I INC EEE		1253	1020	2253	510	Extension for reply within third month	
1. BASIC FILING FEE Large Entity   Small Entity				1590	2254	795	Extension for reply within fourth month	
	Fee Fee Fee Fee Description Code (\$) Fee Paid		1255	2160	2255	1080	Extension for reply within fifth month	
, , ,			1401	500	2401	250	Notice of Appeal	
1	001 395 Utility filing fee		1402	500	2402	250	Filing a brief in support of an appeal	
1	350 2002 175 Design filing fee 550 2003 275 Plant filing fee		1403	1000	2403	500	Request for oral hearing	
	003 275 Plant filing fee 004 395 Reissue filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	005 80 Provisional filling fee		1452	500	2452	250	Petition to revive – unavoidable	
1005 100 2005 60 PTOVISIONAL INITING IDE		L	1453	1500	2453	750	Petition to revive - unintentional	
	SUBTOTAL (1)	(\$) 0	1501	1400	2501	700	Utility issue fee (or reissue)	
2 EXTRACIA	IM FEES FOR UTILITY AND REIS	SUF	1502	800	2502	400	Design issue fee	
L. EXTINA OEA	Fee from		1503	1100	2503	550	Plant issue fee	
Extra Claims below Fee Paid		1460	130	1460	130	Petitions to the Commissioner		
	Total Claims20 ** = 0 X = 0		1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Independent Claims	-3 ** = 0 X	= 0	1806	180	1806	180	Submission of Information Disclosure Stmt	
Multiple Dependent	x	= 0	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
Large Entity	Small Entity	L	1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
Fee Fee Code (\$)	Fee Fee Fee Description		1810	790	2810	395	For each additional invention to be	
1202 50	2202 25 Claims in excess of 20						examined (37 CFR § 1.129(b))	
1201 200	2201 100 Independent claims in e		1801	790	2801	395	Request for Continued Examination (RCE)	395.00
1203 360	2203 180 Multiple dependent clair	•	1802	900	1802	900	Request for expedited examination	
1204 200 2204 100 ** Reissue independent claims over original patent		of a design application					1	
1205 50 2205 25 "* Reissue claims in excess of 20 and over original patent				Other fee (specify)				
SUBTOTAL (2) (\$) 0				*Reduced by Basic Filing Fee Paid				
**or number previously paid, if greater, For Reissues, see above							SUBTOTAL (3) (\$) 399	5
The state of the s								

SUBMITTED BY Complete (if applicable)								
Name (Print/Type)	Michael	Milinzak	1	Registration No. (Attorney/Agent) 43,770		Telephone	(248) 641-1600	
Signature				1		Date	May 24, 2005	
	$\overline{\nu}$							